Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23 Page 1 of 42

MONTANA STATE PRISON INCIDENT REPORT FORM

Date of Incident: 10-17-09 Time of Inci	ident:	1050
Place of Incident: P.A. C. Sweet Acea		
Inmate Involved: High side SWLAT		
Summary of Incident: ON the above date	and.	time I Clo Hotalew
WAS doing a walkthrough of the	RAS	- Swent Area.
after High Side Swept was over	<u> </u>	noticed behind
the small shed that there was Jo	e ces	And toliet paper
Covered under some dirt. Also.	miside	the Teepee I
toward the smug bowl broken	. The	pièce to the
bowl were gathered up except for	about	a gusten of
the bowl.		
F		
E.O. B		
: :		
Reporting Staff (print name): Joshua Hotalew	Title:	%
Signature: Jeh Stotel	Date:	10-17-09
NOTE: Supervisors must review all reports for ac Supervisor Review and Remarks:		
Supervisor (print name):	Title:	
Signature:	Date:	
ROUTING LIST (Place an X next to those this report will be distribu	<pre> ited to):</pre>	
Helena Office (Priority I) MSP Duty Officer Warden or Designee Deputy Warden Deputy Warden Associate Warden MSP Duty Officer Unit Manager Command Post Inmate Records File Inmate Unit File Associate Warden		Medical Maintenance Investigators' Office MCE Other RAC Coordinator Tom Wilson

Date of Incident:	5/12/2010	Time of	Incident: 11	15
Place of Incident:	High Side Dining			
Inmates Involved:			***************************************	
	On the above	date and time I C/O Hotal	en was in the H	ligh Side Dining Hall when
Summary of Incide	~ 11 C 1			weat set-up crew. I asked him
		am not setting up for that p		
why and he stated to				
				11/2010. When I asked inmate
if you was				I don't want to be on the set
up crew. On 5/11/2	010 inmate ap	proached me in the High S	Side Dinning ar	nd asked if he could be on the
set-up crew and I st	ated that I would che	eck on it. E.O.R.		الأدوار المستخدم والمستخدم المستخدم المستخدم المستخدم والمستخدم المستخدم والمستخدم والمستخدم والمستخدم والمستخ المستخدم والمستخدم و
			<u> </u>	

		* *	Tial	. 010
	rint name): Joshua		•	<u>C/O</u>
Signature:	her John		Date:	5/11/2010
NOTE: Supervisor	rs must review all re	ports for accuracy before:	signing off.	
_		,	0	
Supervisor Review	and Remarks:			
Supervisor (print n	name):		Title	
Signature:			Date	
ROUTING LIST	(Place an X next to t	hose this report will be di	stributed to):	
	ce (Priority I)	Security Major	•	Maintenance Investigators' Office
MSP-Duty-(***************************************	Unit Manager Command Post		MCE
Warden or I Deputy War		Inmate Records File	x	
Associate V		Inmate Unit File		Other
Associate V	Marine .	Medical		Other

Page 1 of 1

Date of Incident:	5/12/2010	Time of Incident: 0915
Place of Incident:	Close Unit Three	
Inmates Involved:		
immates involved.	-	
	On above date and time I Co	O Hotalen and C/O Bailey were interviewing inmate
Summary of Incide	VAA. 1	p and he stated that he didn't want to be around any of
., ,, ===		if he didn't want to live on the block with inmate
the tension that was	on the block. I asked inmate	
	do to that is the new	pipe carrier and he stated no. But inmate did
state that when he w	vent up to inmate to con	ngratulate him, inmate stated to him, "get
away from me, I do	n't want nothing to do with you." I	E.O.R.
	-	
	William Willia	the state of the s
· · · · · · · · · · · · · · · · · · ·		
Reporting Staff (pr	rint name): Joshua Hotalen	Title: C/O ····
Signature:	lace / Hotele	Date: -5/12/2010
NOTE: Supervisor	s must review all reports for accura	acy before signing off.
Supervisor Review	and Remarks:	and the second s
Supervisor (print n	ame):	Title:
Signature:		Date:
	Place an X next to those this report	, , , , , , , , , , , , , , , , , , , ,
	ce (Priority I) Security M	
MSP Duty C		
Warden or D	Designee x Command	
Deputy War		
Associate W	arden Inmate Un	it File Other
Associate W	arden Medical	Other

.

MSP 1.1.6A, Incident Reporting

Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23 Page 4 of 42



Date of Incident:

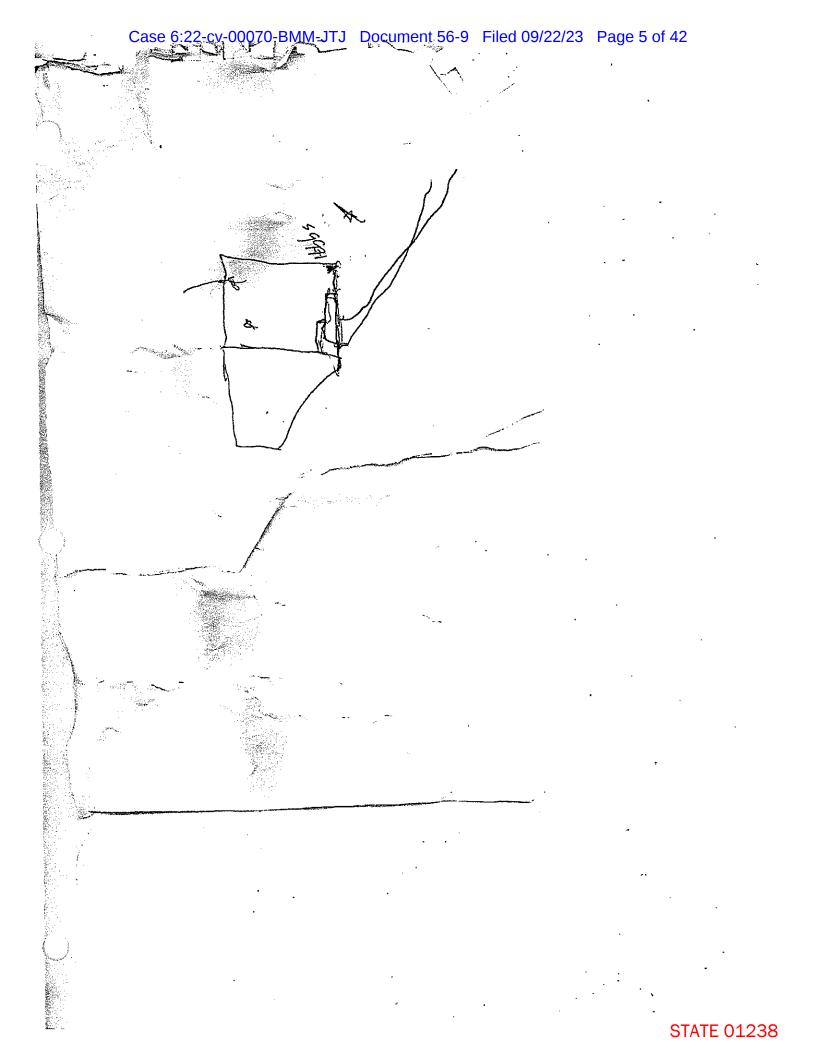
July 14, 2010

MONTANA STATE PRISON

INCIDENT REPORT FORM Page 1 of 1

Time of Incident: 0845

Place of Incident:	Religious Activity Cent	er	· · · · · · · · · · · · · · · · · · ·	
Inmates Involved:	NA			
to shake down the the RAC has to use trash had been acc	area. In the trash was a e. On the paper is a dra umulating since 11:30 A	and time I (Terrie Stefalo) vacrumpled up piece of pape wing like a diagram with sta M of July 13, 2010. Aftern s Low Side Jehovah Witnes	r which ars and oon acti	a series of numbers. The ivities were Low and High
Signature:	Jerri Star	'sli	Date:	July 14, 2010
Reporting Staff: (p	rint name) Terrie Stefalo		Title:	Admin Spec./ Religious Advisor
	NOTE: Supervisors mus	st review all reports for accuracy	before sig	gning off.
Supervisor Review	and Remarks:			
Signature:	<u>.</u>		Date:	_
Reporting Staff: (p	rint name)		Title:	Admin Spec./ Religious Advisor
	ROUTING LIST (Pla	ce an X next to those this report will be d	istributed to	
Ualana (Office (Priority I)	Security Major		Medical
	ity Officer	Unit Manager	+	Maintenance
	or Designee	Command Post		Investigators' Office
Deputy		Inmate Records File		MCE
	te Warden	Inmate Unit File		Other
4	te Warden			
MDIU Revised 24 HaB 2005				



MONTANA STATE PRISON

INCIDENT REPORT FORM

Date of Incident:	5-21-17		Time of Incident:	: 1025
Place of Incident:	≥		**************************************	**************************************
Inmates Involved: Summary of Incident: Tweeter The his cont. Stated "I was He Two braids Two braids when	trying to p I Asked going to send and sent	hide two him what then home! him back ?	Braicle of swee he was cloing I then as he close unit of	t grass one the leed for we. These
·		E.O.R		
Reporting Staff (print	name): Joshua	Hotalen	Title:	Ch)
Signature:	le Soltate		,	5-21-11
NOTE: Supervisors Supervisor Review and		eports for accura	,	
Supervisor (print name):		Т	itle:
Signature:	···		D	ate:
ROUTING LIST (Place	e an X next to those the	his report will be di		
Helena Office (Priori MSP Duty Officer Warden or Designee Deputy Warden Associate Warden Associate Warden	☐ Unit ❷ Com ☐ Inma	ority Major Manager nmand Post ate Records File ate Unit File	Medical Maintenance Investigators' O MCE Other_ZAC	Office

STATE OF MONTANA DEPARTMENT OF CORRECTIONS

MSP MWP CONTRACT FACILITY:_

DISCIPLINARY INFRACTION REPORT / NOTICE OF HEARING

(Information and staff signatures on this form must be legible)

		MAJOR 🗹	MINOR [•	•
Inmate Name:				ID#	
Date: 8/1	3/11 Time:	Place of Inc	ident: 72A	_	
		Unit: CU	Job Assignment:	801	
	er(s) & Name(s)	4234 - Unauthoriza 1228 - Failur to C	d Area/Threat	to orderly 0	peration e:m5p5.6.1
Staff Witness: 1.	·	` (Other Inmates involve	ત 1	
2.				2.	
Description of Vi	iolation: (who, what	why, where, when and ho	ow): On the	above date	frme,
held on	8/13/11/015/1	with AIDEO o		went into	mony an
	ed Area Cle	arly postal wil			arinoted
on the c	area betwe	en the shed	F PAC BU	iiloling (09:	07:50)
Urinating public he	authors a		mates w	no must s	mg a bakeolou
Fully Fu		work, respec		e RAC has	the risk
of welecen	.011 - 40	in The include		eing on e	ur church
MSP 5.61,	prohibits	Nubity. The over	a is open to	plan sight from	the North.
REPORTING ST	AFF MEMBER:	Tom WISO (Print Name)	<u> </u>	(Sign Name)	
Inmate Status: Reason:	☐ Pre-Hearing C	Confinement	clease to Previous Sta	atus Othe	r
I have reviewed this rep	ort for legibility, completene	ess, correctness of charge, and to en	sure all necessary information	n is attached (evidence, inciden	/witness reports, etc.)
' (Shift Super	visor's Signature)	(Date)		n or Designee Signature)	(Date)
Hearing Date: I understand the ch I waive my right to	parge(s)? Yes No na hearing? Yes No earing and present evidence	NOTICE OF HEARING/P informed of my rights. Fime:hrs. Place: (if no, verbally explain the charge(s (if yes, have the inmate sign a wain and witnesses on my behalf. If inn	s) to the inmate). ver form – attachment H)		form (attachment G.)
•	found guilty, I will rational procedure.	be subject to imposition	of the sanctions as	outlined in the institu	tional inmate
	(Staff Signature)	· (Date	& Time)	(Inmate's Signature /	ID#)
Copies to:	1. Records	2. Parole Board (Major)	3. Housing U	nit 4. Inmate	

Revised October, 2009

MSP 3.4.1, Institutional Discipline

Attachment B

Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23 Page 8 of 42

- 9. The following activities are never authorized:
 - a. Animal sacrifice.
 - b. Language or behaviors that might constitute or be construed as a threat (e.g., curses).
 - c. Nudity.
 - d. Self-mutilation.
 - e. Use or display of weapons.
 - f. Exclusion by race.
 - g. Paramilitary exercises.
 - h. Self-defense training.
 - i. Sexual acts.
 - j. Profanity.
 - k. Consumption of alcohol.
 - I. Ingestion of illegal substances.
 - m. Proselytizing.
 - n. Encryption.

Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23 Page 9 of 42



MONTANA STATE PRISON

INCIDENT REPORT FORM

Date of Incident:	08/26/2011	Time of Incident: 14	100
Place of Incident:	RAC		
Inmates Involved:			
Jehovah's Witness warning. About 3 m was clear. I told him saw that he was lear yelled his name and he couldn't go since asked me "Why?" a you could go yet." I be able to go when come and go as you thing as me saying the Rear Guard Stat is no mixed custody Station. I told I/M without permission then sent the Low S	I also informed him that if he tried ide inmates back to their units. Sing unit) and asked the officer to strip	came into the came and saw him running the came and saw him running casons, but it comes down as an inmate and said, "Y is said count was clear." It is pure the came time." It is pure the came time in the came time in the warning log for into pull anything like that the this behavior seemed such as the came into th	ness volunteers a 5 minute RAC lobby and asked if count walk out the front entrance. I ing to the Rear Guard Station. I came back and asked me why ess I told him he could. He want to the fact that I didn't say ver? I'm a grown man. I should You do not have permission to replied, "That is not the same procedure for RAC staff to call ive activity to ensure that there coming through the Guard solence and trying to leave again I would write him up. I
Signature:		Date:	8/26/2011
Reporting Staff: (p	rint name) Russell Danaher	Title:	Religious Activities Advisor
Supervisor Review	NOTE: Supervisors must review all and Remarks:	•	igning off.
Signature: Reporting Staff: (p		Date: Title:	8/29/11 RAC. Coordination
Helena C MSP Du Warden		curity Major it Manager	Medical Maintenance

Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23

Page 10 of 42 MONTANA STATE PRISON

INCIDENT REPORT FORM

Page 1 of 1

COMMAND POST

Date of incident: August 30, 2011 Time of Incident: 1247 Place of Incident: D-unit & RAC Inmates Involved: Summary of Incident: Today at about 1247 hr pipe ceremony was called for at the RAC. A few minutes after the inmates had left I found out that took to pipe ceremony. I believe that took because wanted to go, but was on duty as infirmary aide. has the "C" for Catholic on his card, but not the "NA" for Native American. I called the RAC and Terri agreed that should not be there. unpredictability it was agreed at 1253 hr that she would send got back to the unit he was very upset and said that to the unit with When he is an enrolled member and that he explained the whole pipe ceremony to they went. I had told him that if it was that important for him to go he should have asked and we could have had someone cover for the hour he was to be gone. He claims that for pipe was not authorized to be at ceremony they can bring "visitors" and I told him that the RAC for pipe ceremony because he must first be authorized by policy to attend Native American functions. As well, it is my understanding that current mental condition is such that he would not understand anything that was being said or done. He accused me of discriminating against him and End of report. Kevin A. Hart Reporting Staff (print name): Title: Sergeant. Signature: Date: 8/30/11 NOTE: Supervisors must review all reports for accuracy before signing off. Supervisor Review and Remarks: Supervisor (print name): Title: Signature: Date: ROUTING LIST (Place an X next to those this report will be distributed to): Medical Security Major Helena Office (Priority I) Unit Manager Maintenance MSP Duty Officer Investigators' Office ☑Warden or Designee **Command Post** Deputy Warden Inmate Records File MCE Associate Warden Inmate Unit File Associate Warden

Date of Incident:	02/25/2014	Time of Incident	t: <u>134</u>	2
Place of Incident:	RAC			
Inmates Involved:		B Unit		
Stefalo) reviewed ca visit stands out from Bilodeau noted that standing in the garba Lt Lamb called me (overing an unknown meras during the Lot the rest. she could see his sill age can area in the base	me of something overheard between It	me) and exe was not	xited at 1347. Cherie
and	re cellies.			
Reporting Staff (pr	int name): <u>Terr</u>	rie Stefalo	Title:	RAC Coordinator
Signature:	me Stuf	ato	Date:	2/26/14
NOTE: Supervisor Review		all reports for accuracy before si	igning of	ff.
Supervisor (print n	ame):		Title:	
Signature:			Date:	
ROUTING LIST	Place an X next to the	hose this report will be distributed to):		
	ce (Priority I) Officer Designee rden Varden	Security Major Unit Manager Command Post Inmate Records File Inmate Unit File		Medical Maintenance Investigators' Office MCE Other Other Other



Date of Incident:	07/23/2014	1 ime of incide	RE: 131	LJ
Place of Incident:	RAC Sweat Shed			
Inmates Involved:	N/A	•		
Specialist Russ Dan baggie was wedged	aher, found a clear pla up in the top right con Stefalo who opened it	tine shake down of the RAC Swe astic bag with unidentifiable con rner of the shed, closest to the do and we both determined the con	itents (se oor. I bro	e attached evidence). The ought the baggie to RAC
Signature: 4	200		Date:	07/23/14
Reporting Staff: (p	rint name) Russell Dar	ıaher	Title:	Religious Activities Spec.
	NOTE: Supervisors	must review all reports for accuracy	before sig	gning off.
Supervisor Review	and Remarks:	Forward to (o	mm	rainel Post
\sim				
Signature:	211 1 VIL	-1-1,	Date:	7/23/11/
Reporting Staff: (pr	cint name) Torche	State to	Title:	PAR COARD STA
reporting Starr. (p.		(Place an X next to those this report will be d):
MSP Du Warden o Deputy V	Office (Priority I) ty Officer or Designee Warden e Warden	Security Major Unit Manager Command Post Inmate Records File Inmate Unit File		Medical Maintenance Investigators' Office MCE Other



Date of Incident:	04/07/2015	Time of Inciden	t: <u>074</u>	<u> </u>
Place of Incident:	RAC			
Inmates Involved:		HSU1,		HSU2

Drum Group on the HS Side inmates request long time. He did no received an OSR from may be something no Captain Zuber and in	C calls for High Side Drum High Side. On 4/3/15 RA SU1 showed up. He questing to join the group. I tole to want to stay and drum by most right in this situation sing formed him that there may	at 1415 every week and for mo C Specialist Steve Grant called ioned both Steve Grant and mys d him that no one has requested himself so Steve Grant called HSU2 requesting to be place ce I believe there was a recent had be something up that involves e for the RAC in the event we re-	High Side self, Terrie to be place him back ed on Drur hit placed of these two	Drum and Stefalo, about other High ed on the Drum Group in a to HSU1. On 4/7/15 I m Group. I felt that there on I called inmates. Captain Zuber
D		. 1	FICT- / I	DAC Constitution
Reporting Staff (pri	-1 -	alo	Title: Date:	RAC Coordinator 04/07/15
Signature.	lerry stegres		Date.	04107713
NOTE: Supervis	sors must review all rep	ports for accuracy before si	igning of	f.
Supervisor Review	and Remarks:			
Supervisor (print na	ame):		Title:	
Signature:			Date:	
ROUTING LIST (Place an X next to those the	is report will be distributed to):		
Helena Office MSP Duty C Warden or D Deputy Ward Associate W Associate W	Officer Designee Desi	Security Major Unit Manager Command Post Inmate Records File Inmate Unit File		Medical Maintenance Investigators' Office MCE Other Other Other

CONFIDENTIAL

MONTANA STATE PRISON INCIDENT REPORT FORM

Date/Time: 7-13-	2015 1600	hrs. Place:	High Side Unit I	
Inmates Involved:	CII			
Summary of Incid	ent:			
	unit. He began to ne Native Ameri to back up	cans. stated	sion is coming from the Su ted that Saturday Sweat had I that he heard goin	renos and
the following inma	tes who went to ace to pray and	sweat: said th	be a war between the National at the Natives convinced the lalso said that the Surenos a	ne Surenos
liked by most of the sweat. This inform the RAC. situation, would that had a weap asked if there weapons and that so	e Natives and no ation seems createn began to ask at person be lock on and staff let havere any weapon omeone was goi	withat he is running dible and aligns we if an inmate was ted up? I asked whim go. I told as and said and to get hurt. I a	cking the Surenos because ing with the Surenos, he with staff reports of obvious observed with a weapon is observed with a weapon is what was talking about a local of thought that the Surenos hasked what kind of weapons or shanks in the yard.	ent to s tension at n a tense nd said m. I ad apons they
everything is good dead issue. I asked in the chow hall and the reported incider Given the amount of	about what and dealled them out the between from the free free free free free free free fr	went to sweat. he hesitantly tolo t and was disresp and tivity in recent w	with said they talked and all me that someone approachectful to his friend. This was in the chow hall last weeks, it does not appear that to monitor the situation.	l it was a hed them ould be week.
After speaki issue at the RAC was explained that arrived and told	as a result of the showe	d up to sweat abo	in HSŪI.	that the

CONFIDENTIAL

cc:	Warden Deputy Warden I Deputy Warden II Deputy Warden III arks:	Reporting Security Major Command Post Unit CS/CSC Unit Manager	Staff Signature Investigator Inmate File Medical Department Duty Officer
cc:	Deputy Warden I Deputy Warden II	Security Major Command Post Unit CS/CSC	Investigator Inmate File Medical Department
		Reporting	Staff Signature
towa	When the upper tier was her inmate, "get to be with the control of	seemed overly concer walk toward his cell, g small out of his shirt. He	then entered UA12
UA, Sgt. I that t The i and S	McDonald did report that the he tension was a result of w	ing up and down like a boxe ere was obvious tension and that took place at the gym ar on obtained in HSUI indicate	er prior to leaving the block. I that to be told him and that someone misspoke. The state of the threat level is high.
	both did put gloves on pri	or the sweat movement and or to leaving their blocks.	confirmed that and Staff confiscated them when
	According to the un	asked what he was d and that if he was	trying to go to oing hanging with them and caught hanging with sexers, He said he had to stay hard.

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Date of Incident:	1/22/16	Time of Incident:	1100	
Place of Incident:	RAC Sweat Shed			
Inmates Involved:				
inmates involved:				Monthly 1
Summary of Incide	ent:	6 11 1 1 1 1 1	. O. 1	
On the above date at	nd time RAC Specialist Steve Grant, rial for setting up the sweat lodge are	After dismissing the Swea	door to	o shed. Grant noticed a
smell that was strong	rnal for setting up the sweat lodge are gly suggestive of marijuana. When the	ne shed had been opened a	at 1000	hrs the smell had not been
noticed. Upon the d	iscovery of the smell Grant called Co	mmand Post to report the	smell.	ISP was sent to
investigate and search				
				
			<u> </u>	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
				AND THE RESERVE OF THE PERSON
Reporting Staff (pr	int name): Steven D. Grant	Tit	tle:	RAC Specialist
//			-	1/22/16
Signature:	0(14)	Da	ite:	1/22/10
NOTE. Comme	ingen myst roving all rangets for	acouracy hafora cioni	na off	,
NOIL: Supervi	sors must review all reports for	accuracy octore signi	ng on	.•
Supervisor Review	and Remarks:			
-	VALUE AND ADDRESS OF THE PARTY			
		Part 9	41	- Ulastra province in the state of the state
Supervisor (print n	ame):	'l'i	tle:	
Signature:		Da	ate:	**************************************
ROUTING LIST	(Place an X next to those this report v	vill be distributed to):		
	ce (Priority I) Security			Medical
MSP Duty		-		Maintenance
Warden or l	Designee Comman	d Post		Investigators' Office
Deputy Wa		ecords File	Щ_	MCE
Associate V		nit File	<u> </u>	Other
Associate V	Varden		님	Other
4				Other

Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23 Page 19 of 42



Date of Incident:

08/16/16

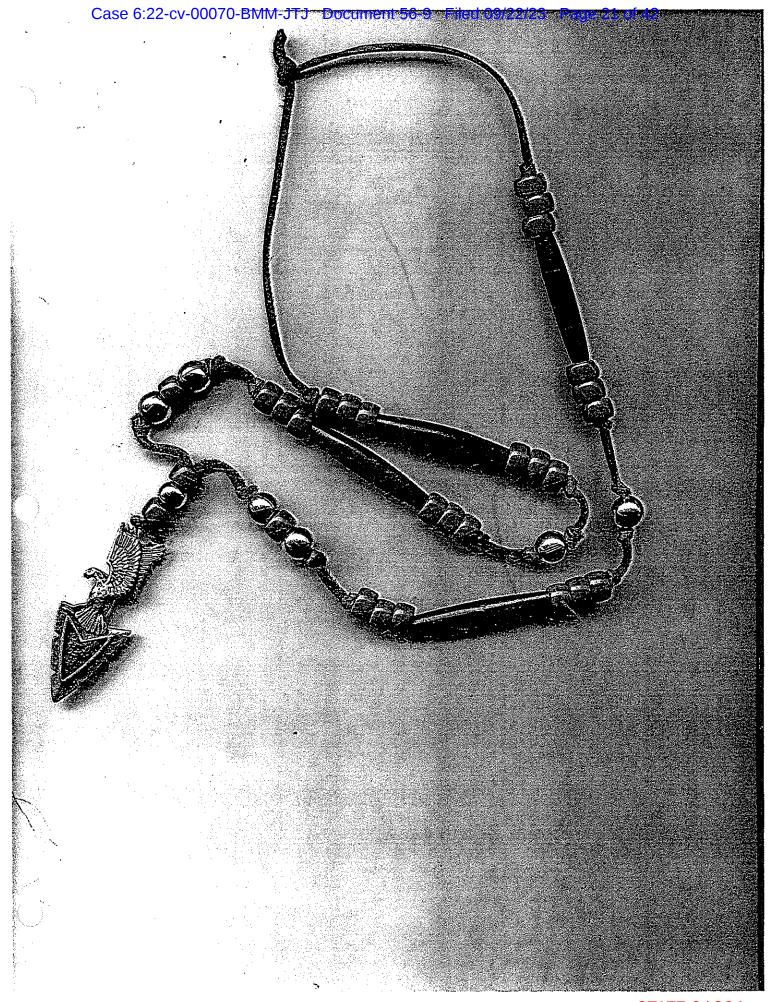
MONTANA STATE PRISON

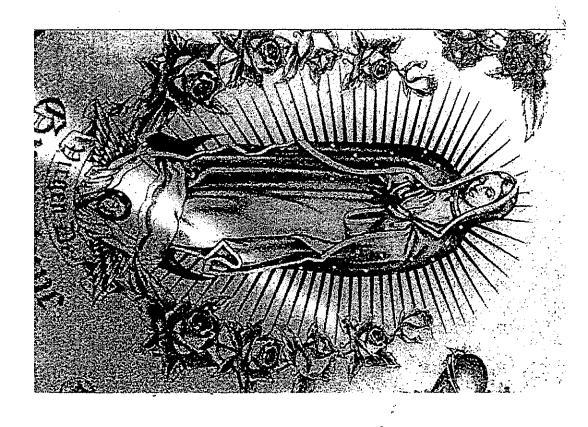
INCIDENT REPORT FORM Page 1 of 1

Time of Incident: 1527

Place of Incident: RAC		
Inmates Involved:?		
HSU1 Pipe Ceremony ended at 1520. The Fire Alarm went off about 1527 as the Ir I called maintenance to shut off the alarm. An officer discovered that the Fire Alarm at JD (Maintenance) arrived and shut the alarm Sgt. Hotchkiss and CO "Dusty" remained to Sgt. Hotchkiss burned the USB. He and Dus Pipe Ceremony. JD returned at 1640 to reset the Fire Alarm.	the back door of the RAC had been post. off. view the video tape. CO "Dusty" we	pulled. ent to Command Post for USB.
Signature:	Date:	
Reporting Staff: (print name) Susan Trueax	Title:	RAC Specialist
Supervisor Review and Remarks: Signature:	Date	
Reporting Staff: (print name)	Title:	
<u> </u>	ace an X next to those this report will be distributed	to):
Helena Office (Priority I) MSP Duty Officer Warden or Designee Deputy Warden Associate Warden	Security Major Unit Manager Command Post Inmate Records File Inmate Unit File	Medical Maintenance Investigators' Office MCE Other
Date of Incident:	Time of Incident:	
Signature:	Dat	ie:

Date of Incident:	September 27, 2016	_ Time of Incident:	1425	-1520
Place of Incident:	RAC			
Inmates Involved:				
		MARIEMAN AT		
On the above date ar	nt: ad time HSU1 inmates were called to l	Pine Ceremony Twenty	eight i	inmates attended which is a
	nal for Pipe Ceremony. Throughout r	nost of the service inmate	es'	
				ation to the point of being
	I gave them all a signal that they were im over to ask him about it. He said h			had something in his ot have time to put them
	his pictures. One picture appears to be			
Park written on the b	eack.			
w	as wearing a red beaded arrowhead ne	ckace outside of his shirt	. I info	ormed him that this was an
unauthorized item no	ot approved for personal property and			
mail it out. I told hir	n no.			
End of Report.				
		Market Ma		
\(\frac{1}{2}\)				**************************************
Reporting Staff (pr		Titl	le:	RAC Coordinator
Signature:	erre Stefra	Dat	te:	09/27/16
	ν			
NOTE: Supervis	sors must review all reports for a	ccuracy before signin	ıg off	•
Supervisor Review	and Remarks:			
•	4			
Supervisor (print na	ima):	Titl	ام،	***************************************
			-	
Signature:		Dat	te:	
	Place an X next to those this report wi			* * * *
Helena Office MSP Duty C	e (Priority I) Security M Officer Unit Mana			Medical Maintenance
Warden or D				Investigators' Office
Deputy War	den Inmate Rec			MCE
Associate W Associate W		t File	<u> </u>	Other
Associate w	aruen			Other





7506

1015



STATE 01293

Leaving Zootand to Idaho

whats that green dot? In allot of my pics.

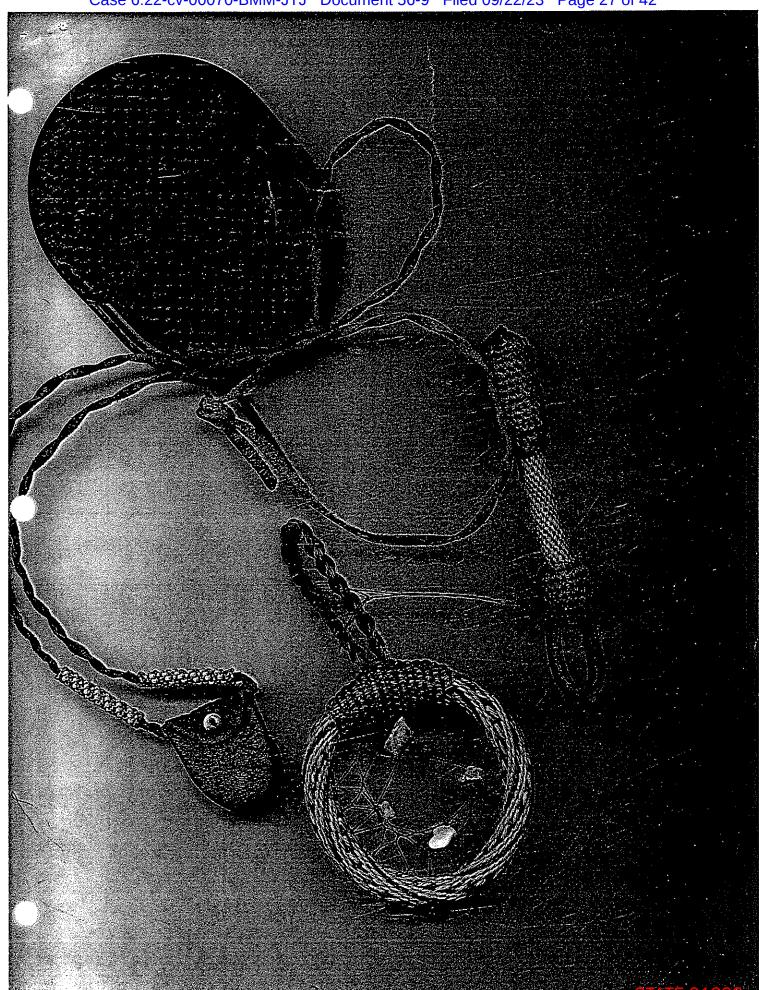
Ted or UFO LOL



STATE 01294



Date of Incident:	10/18/16	Time of Incident:	1035
Place of Incident:	RAC Outside Worship Area		
Inmates Involved:			
	W	A CALLETT WITH CONTRACT OF THE	
mound by the Sweat	ent: and time, I, Terrie Stefalo, was shaking Lodge I found a handcrafted medicing as of hard candy and an apple. End o	ne bag, dream catcher and d	te RAC. On the bush and dirt rum stick. I also found a plastic
			144-MANAGAR
Reporting Staff (pr	int name): Terrie Stefalo	Title	: RAC Coordinator
Signature:	Serve Steldie	Date	: 10/18/16
	<i>U</i>	1 . 6	
NOTE: Supervi	sors must review all reports for	accuracy before signing	; оп.
Supervisor Review	and Remarks:		
Supervisor (print na	ame):	Title	
Signature:		Date	:
	Place an X next to those this report w	ill be distributed to):	
Helena Office MSP Duty Compared Warden or I Deputy War Associate W Associate W	Designee Command rden Inmate Re Varden Inmate Un	ager	Medical Maintenance Investigators' Office MCE Other Other Other





Montana Department of Corrections Statement of Incident

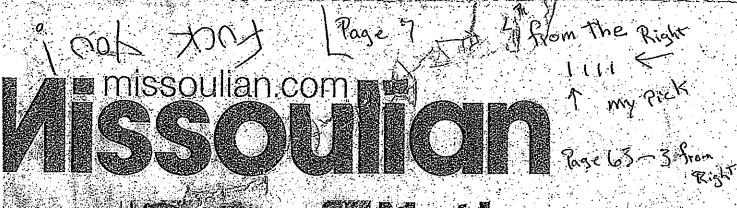
	COMMAND POSTY. LEZ
;	Initial Approva

Title: Written message on Newspaper	
Incident Date: 02/24/2017 Incident Time: 01:00 PM Statement Date	ate: 02/24/2017
Jurisdiction: Montana State Prison Submission Status: DF	RAFT
Incident Scene	
Incident Occurred at Facility? Yes	
Location: Montana State Prison/Religious Activities Center's Outside area.	
Summary of Incident	
On the above date and time, I (Terrie Stefalo) was shaking down the outside grounds by the Stefalo of Religious Activities Center. Under the Sweat Shed, I noticed a bundle of newspaper and when bundle, the outside layer had a message written on it. "Fuck You! Page 7 (an arrow line) 4th from arrow line) 1 1 1 1 (an arrow line pointing to the first 1) my pick Page 63 - 3 from right" (see at newspaper). End of Report.	n I removed the om the Right (an
Involved Persons	
No Individuals are associated with this Incident Statement	
Source and Documentation	
Confidential Informant: No	
Information Source: Staff - Stefalo, Terrie	
Reporting Staff: Stefalo, Terrie Title: Business Operations Su	p
Signature: Date:	
Notes	
No Notes are associated with this Incident Statement	
NOTE: Supervisors must review all reports for accuracy before signing off	
Supervisor Review and Remarks:	
Supervisor Name: Title:	
Signature: Date:	
Routing List (Place an X next to those this report will be distributed to):	
Helena Office Security Major Me	edical
MSP Duty Officer Unit Manager Ma	aintenance
Mor Day Omor	aintenance /estigator's Office
	estigator's Office
Warden or Designee Command Post Inv Deputy Warden Inmate Records File MC	estigator's Office
Warden or Designee Command Post Inv Deputy Warden Inmate Records File MC	vestigator's Office CE

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 02/24/2017 @ 01:11 PM

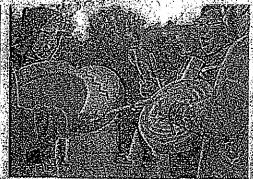
Page 1 of 1



IRTS.DI

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Native celebration

Indigenous Peoples' Day celebrated at UM MONTANA, BI

UN/SNOW 47 • 23 FORECAST, AS | TUESDAY, OCTOBER 11, 2016 | missoulian.com

de you receive is overwhelming'

has the legal authority s of people with develtal disabilities to obtain 1 Montana.

he normal, everyday Joe, ink what's the big deal for a year now! uardianship," said Maryunt, family support spet Missoula's Child Devel+ Center. "But there's a lot s into it."

was from a family he had to obtain legal guardianship 8 years before when they their son. needed his help again. 92, the going rate for

adoption services from other atn behalf of an individual. torneys was about \$400 which las been working with the couple couldn't afford Riley had been charging \$50.

"In a flash I thought, Holy lardianship since 2012 in cow," Riley said. "This couple badly wanted to adopt the baby, he wants to expand it and the baby was available. But for that unreasonable fee, the child would have been with them

> He didn't tell them, but hi mind was made up. He would stop charging for adoption services.

The couple's son has develop mental disabilities, and now that 10. Riley got a phone the was 18 years old, they needed

> It was deja yu. Again, Riley de cided not to charge.

Please see GUARDIANSHIP, Page A4 110 families across Montana.



Retired attorney Larry Riley has been devoting his time to his legal guardianship project, an effort to bring the service at a free or reduced rate





Montana Department of Corrections Statement of Incident



Title: tattoo devid	ce			Statement #:	1675
Incident Date:	04/20/2017	Incident Time:	08:30 AM	Statement Date:	04/20/2017
Jurisdiction: Mo	ntana State Prison	l			
Incident Scene	_				
Incident Occurre	d at Facility? Yes				
Location: Monta	na State Prison/Sv	veat lodge shed ,R	AC		
Summary of Inci	ident	•			
electric shaver. Th	ne motor and all into the shed. It appea	ernal components	were missing from	I found a motor casing for a n this razor. It was laying on squirrel and was either plac	the ground
Involved Person	S				
No Individuals are	associated with th	is Incident Stateme	ent		***************************************
Source and Dee	umantatian				
Source and Doc Confidential Info					
Information Sour		NICHAEI			
Reporting Staff:	<i>[][</i>]		Title: Co	rrectional Officer SupMgr	
M	1/1/1/2			1 7	
Signature: //	1/10/		Date:	: 4/20/17	******
Notes u	XX			· ·	
No Notes are asso	ociated with this Inc	ident Statement		•	
NOTE: Supervise	ors must review	all reports for a	ccuracy before	signing off	
Company					
Supervisor Revie	w and Hemarks:				······································
Supervisor Name			Title:		
Signature:					
Routing List (Pla					
Helena O	ffice	Secur	ity Major	Medical	
MSP Duty		Unit N		Maintena	
Warden o	r Designee	Comn	-	Investigat	or's Office
Deputy W	•	-	e Records File	MCE	
Associate	Warden	Inmat		Safety Co	mmittee
Other			-		

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 04/20/2017 @ 09:45 AM

Page 1 of 1



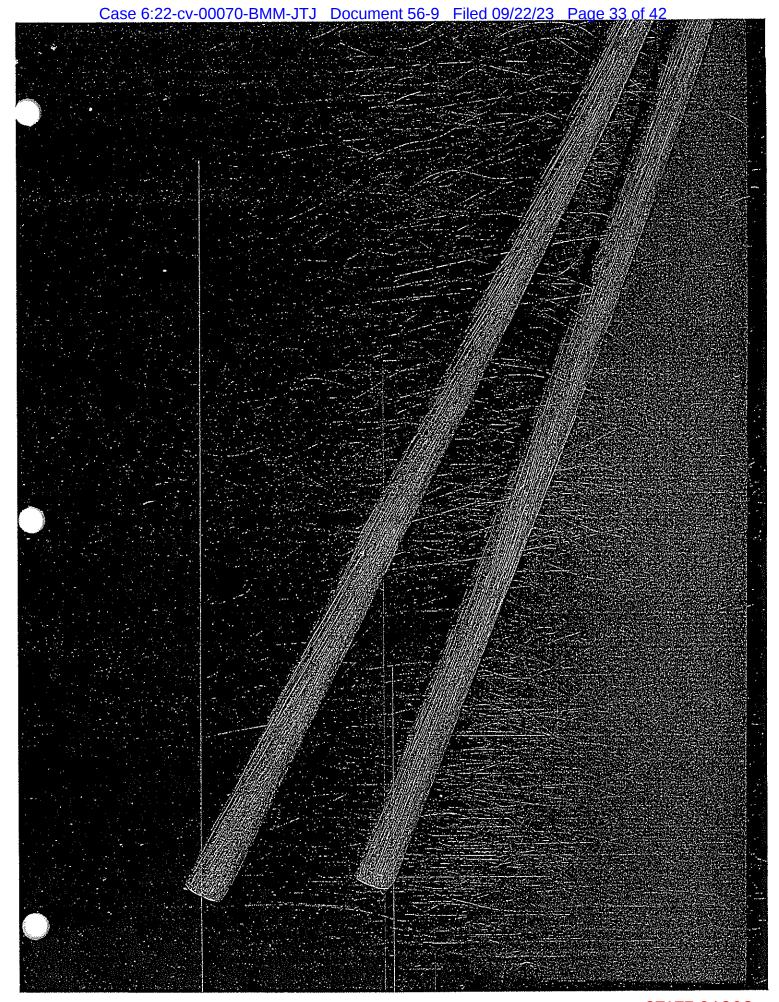
Montana Department of Corrections Statement of Incident

			Statement #: 2185
Incident Date: 05/12/2017 Inc	cident Time:	01:20 PM	Statement Date: 05/12/2017
Jurisdiction: Montana State Prison			
Incident Scene			
Incident Occurred at Facility? Yes			
Location: Montana State Prison/Religi	ous Activities C	Center	
Summary of Incident			
On the above date and time, I (Terrie St bucket was a Dr. Pepper bottle. In the t wooden dowels. End of Report.			
Involved Persons			
No Individuals are associated with this I	ncident Statem	ent	
Source and Documentation			
Confidential Informant: No			
Information Source: Staff - STEFALO	, TERRIE		
Reporting Staff: Stefalo, Terrie		Title: Bu	siness Operations Sup
Signature: Settle High	en w	Date	:571217
Notes	v		
No Notes are associated with this Incide	ent Statement		
NOTE: Supervisors must review al	l reports for	accuracy hefore	signing off
MOTE. Supervisors must review as	reports for	doodiday beroit	. Jighing On
Supervisor Review and Remarks:			
oupervisor iteview and itematics.			
oupervisor Neview and Nemarks.			
			:
Supervisor Name:		Title	:
Supervisor Name:Signature:		Title	:
Supervisor Name: Signature: Routing List (Place an X next to th	ose this repo	Title Date	:
Supervisor Name: Signature: Routing List (Place an X next to th Helena Office	ose this repo	Title Date ort will be distributiy Major	: : outed to):
Supervisor Name: Signature: Routing List (Place an X next to th Helena Office MSP Duty Officer	ose this repo Secu Unit	Title Date ort will be distriburity Major Manager	: outed to): Medical Maintenance
Supervisor Name: Signature: Routing List (Place an X next to th Helena Office MSP Duty Officer Warden or Designee	ose this repo Secu Unit Com	Title Date ort will be distribuity Major Manager mand Post	:
Supervisor Name: Signature: Routing List (Place an X next to th Helena Office MSP Duty Officer Warden or Designee Deputy Warden	ose this repo Secu Unit Com	Title Date ort will be distribuity Major Manager Imand Post ate Records File	:
Supervisor Name: Signature: Routing List (Place an X next to th Helena Office MSP Duty Officer Warden or Designee	ose this repo Secu Unit Com	Title Date ort will be distribuity Major Manager mand Post	:

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 05/12/2017 @ 01:25 PM

Page 1 of 1





Statement of Incident

Title: Six Inch N	Vail	SCHOOL SET TO SELECT TO SELECT TO SEE THE SECOND SET OF SECOND SEC		Statement #:	3773
Incident Date:	07/28/2017	Incident Time:	10:30 AM	Statement Date:	07/28/2017
Jurisdiction: M	lontana State Priso	n			
Incident Scene	•				
Incident Occurr	red at Facility? Ye	es			
Location: Mont	tana State Prison/F	Religious Activities C	enter / Outside Fir	re Pit	
Summary of In	cident				
On the above da nail he found in t fence post. End	he fire pit ash pile.	who Also found in the v		brought to me a more nails slightly attached	
Involved Perso	ns				
No Individuals a	re associated with	this Incident Statem	ent		
Source and Do	cumentation				
Confidential Inf	ormant: No				
Information So	urce: Staff - STEF	ALO, TERRIE			
Reporting Staff	Stefalo, Ter	rie	Title	: Business Operations Sup	
Signature:	Jene &	tefre	Date	: <u>7/28/n</u>	
Notes	/	U		/	
No Notes are as	sociated with this I	ncident Statement			
NOTE: Supervi	isors must revie	w all reports for	accuracy before	e signing off	
Supervisor Kev	riew and Remarks				
			App 4 z B		······································
Supervisor Nar	ne:		Title		
Signature:			Date	*	
Routing List (F	Place an X next t	o those this repo	rt will be distrib	outed to):	
Helena	Office	Secu	ırity Major	Medical	
MSP D	uty Officer	Unit	Manager	Maintena	nce
Warder	n or Designee	Com	mand Post	Investiga	tor's Office
Deputy	Warden	Inma	ite Records File	MCE	
Associa	ate Warden	Inma	te Unit File	Safety Co	ommittee
Other					

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 07/28/2017 @ 10:51 AM

Page 1 of 1



Statement of Incident

Title: Contraband Found	Statement #:	5383
Incident Date: 10/10/2017 Incident Time: 09:00 AM	Statement Date:	10/10/2017
Jurisdiction: Montana State Prison		
Incident Scene		
Incident Occurred at Facility? Yes		
Location: Montana State Prison/Religious Activities Center Outside area near S	Sweat.	
Summary of Incident		
On the above date and time a pair of tennis shoes were found on the Outside gro shoes were against the wall near the drain. End of report.	ounds where Sweat o	occurs. The
Involved Persons		,,,
No Individuals are associated with this Incident Statement		
Source and Documentation		
Confidential Informant: No		
Information Source: Staff - Stefalo, Terrie		
Reporting Staff: / Stefalo, Terrie Title: Busine	ess Operations Sup	
Signature: [UTpsw Date: /	0/10/17	
Notes	,	
No Notes are associated with this Incident Statement		
NOTE: Supervisors must review all reports for accuracy before signif	ng off	
Supervisor Review and Remarks:		
Supervisor Name: Title:		
Signature: Date:		
Routing List (Place an X next to those this report will be distributed to		
Helena Office Security Major	Medical	
MSP Duty Officer Unit Manager	Maintena	nce
Warden or Designee Command Post	Investigat	or's Office
Deputy Warden Inmate Records File	MCE	
Associate Warden Inmate Unit File	Safety Co	mmittee
Other	-	

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 10/10/2017 @ 09:30 AM

Page 1 of 1





Statement of Incident

Title: Nail Fou	nd During Sweat S	et-up	eri ku ili ili ili ili ili ili ili ili ili il	Statement #:	5437
Incident Date:	10/13/2017	Incident Time:	11:00 AM	Statement Date:	10/13/2017
Jurisdiction: I	Montana State Priso	on			
Incident Scen	e				
Incident Occur	red at Facility? N	0			
Location: Mor	ntana State Prison a	at the Religious Activ	rities Center		
Summary of li	ncident				
to their units be	cause set-up for the ell to Specialist Gran said that he	week-end sweat ha	ad been complet d a nail that was	um the inmates on the Sweat Sted. If found in the wood that is used pulled it out and that the end o	returned to start the
end of the nail a Specialist Gran	appears to have a e t notified SSG Snov	nd that was cut beca	ause of the end or requested an in	Iditional inch of metal at the cur of the nail being smooth and fla acedent report and that Special	at.
Involved Pers	ons				
Category	Person	Nar	rative		
				ann mer are wer was mer ton we mer mer mer mer tere tere tere tere te	
Source and Do				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Confidential In					
Information So	ource: Staff - Gran	t, Steven			
Reporting Staf	f: Grant, Steve	en /	Tit	le: Program Specialist	
Signature:	THO SL		Da	te: 18/15/17	
Notes					
No Notes are as	ssociated with this I	ncident Statement			
NOTE: Superv	risors must revie	w all reports for a	accuracy befo	ore signing off	
Supervisor Re	view and Remarks	: Reviewed	¿Distri	buted Dispes	ied
of mi	Lin Sha	ops Conta	ne(<u>-</u>
Supervisor Na	me J bonna	S. Snowder	7 Tit	le: <u>Staff Soc</u>	eant_
Signature:)	rouden_	Da	te: <u>/0-/3-/</u>	
Routing List (I	Place an X next t	o those this repo	rt will be distr	ributed to):	
Helena	Office	Secu	rity Major	Medical	
MSP D	outy Officer	Unit I	Manager	Maintena	nce
Warde	n or Designee	Com	mand Post	Investigat	or's Office
Deputy	Warden	Inma	te Records File	MCE	
Note: This statemen	nt of incident may be ti	ne only statement of the	described incider	nt, or it may be one of several. All st	atements of

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 10/13/2017 @ 12:14 PM

Page 1 of 2



Statement of Incident

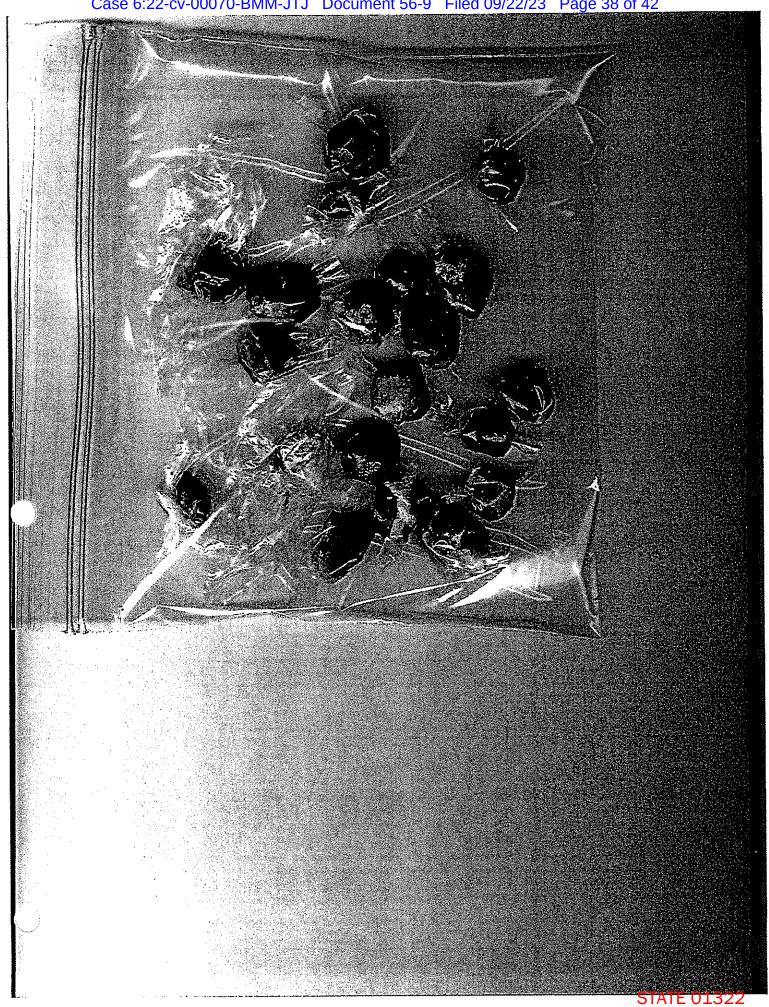
Title: Unidentified Contraband			Statement #:	15005
Incident Date: 07/31/2018 Inc	ident Time:	10:50 AM	Statement Date:	07/31/2018
Jurisdiction: Montana State Prison				
Incident Scene				
Incident Occurred at Facility? Yes				
Location: Montana State Prison/Religi	ous Activities (Center		
Summary of Incident				
On the above date and time, I (Terrie St Native American Locker at the RAC. Th available to the Native Americans. End	ey have a spic) individually wrap e scent to them t	pped unidentified items in the hat is not familiar to the botar	Low Side iicals
Involved Persons				
No Individuals are associated with this I	ncident Statem	ient		
Source and Documentation				
Confidential Informant: No				
Information Source: Staff - Stefalo, To	errie			
Reporting Staff: Stefalo, Terrie		Titl	le: Business Operations Sup	
Signature: Mu tul	Lala	Dat	te: <u>1/3//8</u>	
Notes	/			
No Notes are associated with this Incide	ent Statement			
NOTE: Supervisors must review al	l reports for	accuracy befo	re signing off	
Supervisor Review and Remarks:				
Supervisor Name:		Titl	le:	
Signature: Routing List (Place an X next to th				
Helena Office		urity Major	Medical	·
MSP Duty Officer		Manager	Maintena	nce
Warden or Designee		mand Post		tor's Office
Deputy Warden		ate Records File	MCE	
		ate Unit File	Safety C	ommittee
Associate Warden	11 (1818	ate Other ne	Calety C	onanico
Other				

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 07/31/2018 @ 11:04 AM

Page 1 of 1

Case 6:22-cv-00070-BMM-JTJ Document 56-9 Filed 09/22/23 Page 38 of 42





Statement of Incident

Title: Unidentifie	ed Contraband 2			Statement #:	15013
Incident Date:	07/31/2018	Incident Time:	11:20 AM	Statement Date:	07/31/2018
Jurisdiction: Mo	ontana State Pris	on			
Incident Scene					
Incident Occurre	ed at Facility? N	lo			
Location: Religi	ous Activities Ce	nter			
Summary of Inc	ident				
		rrie Stefalo) walked a nto pieces. End of R		t grounds and found unknown	item
Involved Person	ns				· · · · · · · · · · · · · · · · · · ·
No Individuals are	e associated with	this Incident Statem	ent		
Source and Do	cumentation				
Confidential Info	ormant: No				
Information Sou	rce: Staff - Stef	alo, Terrie			
Reporting Staff:	Stefalo, Te	rrie	Tit	le: Business Operations Sup	
Signature:	Mu	Diefne	U Da	te: 7/31/18	
Notes		U		7.	
No Notes are ass	ociated with this	Incident Statement			
NOTE: Supervi	sors must revi	ew all reports for	accuracy befo	re signing off	
Supervisor Revi	owand Barrark				
Supervisor Kevi	ew and Kemaik		w		
Supervisor Nam	ie:		Tit	le:	
Signature:		•	Da	te:	
Routing List (P	lace an X next	to those this repo	ort will be distr	ributed to):	
Helena	Office	Secu	ırity Major	Medical	
MSP Du	ity Officer	Unit	Manager	Maintena	nce
Warden	or Designee	Com	mand Post	Investiga	tor's Office
Deputy	Warden	Inma	ate Records File	MCE	
Associa		Inma	ate Unit File	Safety Co	ommittee
Other					

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 07/31/2018 @ 12:26 PM

Page 1 of 1



Statement of Incident

Title: Sweat incedent				Stateme	nt #:	26409
Incident Date: 04/27	/2019	Incident Time:	08:15 AM	Statement D	ate:	05/02/2019
Jurisdiction: Montana	State Prison					
Incident Scene						
Incident Occurred at F	acility? No					
Location: Rac Sweat 6	Grounds					
Summary of Incident					· · · · · · · · · · · · · · · · · · ·	
on Saturday 4/27/2019 considered underwear a this out later when I four everyone else exit the losomeone else in their ubeing mouthy as a sumilow sides wood for sweat today. When sweat endany posted or unit rule.	and that if he and him sweat odge to make underwear. The mery action at the begred I delivere	wanted to sweat he ting in his boxers. The sure no one else hey said they would and had him put in ging of the ceremod to Sgt. Gwin in H	e would have to was sweating in of the grieving me. the unit warning lines. So in short to	nd of a round at that time only there underwear. If I also sent ballog. I also caught them of they were not behaving	ed me e i ma though ck to getting very v	e. I found ade ht i seen the unit for g into the
Involved Persons						
Category Person	1	Na:	rative	effect being told be a	could	not sweat
Offender			nate cougnt in box inderwear	cers after being told he	Jouid	: Ot 3 O C C C C C C C C C
Offender		_ <u></u>	nate being mouth	/ /		
Source and Docume	ntation					
Confidential Informan	t: No					
Information Source:	Staff - Pierce	, Patrick				
Reporting Staff:	Pierce, Patri	ck	Titl	e: Correctional Officer		
Signature:			Dat	te: 5-22019		
Notes						
No Notes are associate	ed with this Ir	ncident Statement				
NOTE: Supervisors	must revie	w all reports for	accuracy befo	re signing off		
Supervisor Review at					·····	
Supervisor Name:			Tit	le:		
Signature:				te:		
Routing List (Place	an X next t	o those this rep	ort will be dist	ributed to):		***
Helena Office			urity Major	Me	dical	
MSP Duty Off	ficer	Uni	t Manager		inten	
Warden or De	esignee	Cor	nmand Post	inv	estig:	ator's Office

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.



Incident Statements for Montana State Prison

Search Criteria						
Facility	Category	Phrase	Reported	Ву		
Complex	Involved			Statement # 32251		
Search Results						
32251 - Norteno Interviews - 09/17/2019 @ 11:00 AM						
Jurisdiction: Me	ontana State Prison		Report Date:	09/17/2019		
Incident Scene						
· · · · · · · · · · · · · · · · · · ·	ed at Facility? Yes					
Location: Monta	ana State Prison					
Summary of Inc	eident					
On the above dat	te & approximate time myself and S	TG Short interviewed sev	eral Norteno inmates.			
inked from head to skin and his OMI updated and add	claimed he needed to go lows cource of information provided in a p to toe and had some Norteno ink co S is not updated as well and what h ressed as it appears he has not be Jovanovich is not credible.	he stumbled for a respective to the stumble of the	sponse an said it was o of his actions. He is o ral more. His ID card s ipload photos. This wi	currently shows solid Il need to be		
among the whites issues with the N problems or accu easily sell drugs a	s interviewed and he stated that the sout no beefs or threats. Apparent atives. He indicated that the only finations. He was asked about drug at a lower cost and beat them out be out of state transfer.	ly some whites were trying unction they go to is yard activity and he stated the	g to go to sweat and it / gym because they do re is no competition. I	caused not want le could		
because separation needs be acted upon. I do their signing a	is escorted over to HSU2 are on him. stated there said things were actually getting anymore as we walk to chow and the only issues were with the whites	nd stands in front and was just looks away from it be better with the separation ey are not yelling South S	running his mouth that cause there are no isso of housing units. HSU ide from the yard and o	ture put ues going to J1 doesn't		
the clippoard. He I asked him abou where he was pu	s interviewed and I asked him abou e stated that he threw it away in the it tensions and if there were any rev nched out in the front of the HSU1 said that things have been fine sind	garbage that same night. venge talks since the last i building or the incident be	He only wanted the binteraction at the high street	ooard piece. security gym in the		
Through these in when	terviews there does not appear to be secorted by education standi			t appears is		

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.

Printed: 04/30/2020 @ 10:58 AM Page 1 of 2 Original - 02/23/2017



Notes

Montana Department of Corrections

Incident Statements for Montana State Prison

nvolved Pe	rsons		
Category	Person	Narrative	
Offender		Interview	
Source and	Documentation	·	
Confidential	Informant: No		
Information	Source: Staff - Wigert, Roxanne		
Reporting S	taff: Wigert, Roxanne		Title: Fingerprint & Evidence Tech

No Notes are associated with this Incident Statement

Note: This statement of incident may be the only statement of the described incident, or it may be one of several. All statements of this incident will be collected and combined into a single incident report.